

INSTRUCTIONS FOR SCHOOL DISTRICTS

Free and Reduced-Price School Meals Application

This packet contains:

Required information that *must* be provided to households:

- Letter to Households for Pricing Programs
- Letter to Households for Non-pricing Programs
- Free and Reduced-Price School Meals Application

The pages are designed to be printed on 8½" by 11" paper. Print the Instructions for Applying on the back of the Letter to Households. Print the page with the Federal Income Chart on the back of the School Meals Application. You will need to identify the benefits that are offered in your school, such as after school snacks. [Bold Bracketed Fields] indicate where you need to insert your school district's specific information. If you make changes to these materials beyond filling in your school district's specific information, you must submit your application package to the state agency for approval.

The Department of Public Health and Human Services mails a Direct Certification Letter each year in August to each household eligible for food stamps. Please ask families receiving the letter to submit it to the district. An application does not need to be completed if the Direct Certification letter is on file in your school district.

If you have questions, contact:

School Nutrition Programs
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501
(406) 444-2501
http://www.opi.state.mt.us/schoolfood/index.html

Your child(ren) may qualify for free or reduced-price meals or free milk if your household income falls within the limits on this chart.

FEDERAL INCOME CHART For School Year 2004-05			
Household	Yearly(\$)	Monthly(\$)	Weekly(\$)
size			
1	17,244	1,436	332
2	23,107	1,926	445
3	28,990	2,416	558
4	34,873	2,907	671
5	40,756	3,397	784
6	46,639	3,887	897
7	52,522	4,377	1,011
8	58,405	4,868	1,124
Each	5,883	491	114
additional			
person:			

Privacy Act Statement: This explains how we will use the information you give us.

The National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child(ren) for free or reduced-price meals. The Social Security Number of the adult household member who signs the application is required unless you list Food Stamp, FDPIR, or FAIM case numbers for all children you are applying for, OR if you are applying for a foster child. We WILL use your information to see if your children are eligible for free or reduced-price meals, to run the program, and to enforce the rules of the program.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to *USDA*, *Director*, *Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington DC 20250-9410* or call 202-720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.